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UNITED STATES PATENT AND TRADEMARK OFFICE

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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/923,251         | 08/03/2001          | Kazuhiro Ide          | TSU001                 |

25962  
SLATER & MATSIL, L.L.P.  
17950 PRESTON RD, SUITE 1000  
DALLAS, TX 75252-5793

CONFIRMATION NO. 9149

## FORMALITIES LETTER



\*OC000000006539631\*

Date Mailed: 09/10/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

10/11/2001 SZEWDIE1 00000039 09923251

01 FC:205 65.00 OP  
02 FC:201 370.00 OP

FILED UNDER 37 CFR 1.53(b)

**Filing Date Granted**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

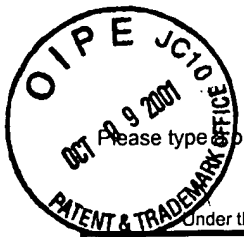
- The statutory basic filing fee is missing.  
*Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).*
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 840.**

*A copy of this notice **MUST** be returned with the reply.*

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Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



Please type or plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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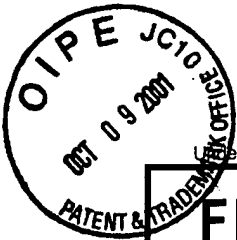
|  |                      |                        |        |
|--|----------------------|------------------------|--------|
| <b>TRANSMITTAL<br/>FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 09/923,251             |        |
|  | Filing Date          | Aug 3, 2001            |        |
|  | First Named Inventor | Ide, Kazuhiro          |        |
|  | Group Art Unit       | TBD                    |        |
|  | Examiner Name        | TBD                    |        |
| Total Number of Pages in This Submission   | 8                    | Attorney Docket Number | TSU001 |

| ENCLOSURES (check all that apply)   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                                | <input checked="" type="checkbox"/> Assignment Papers (for an Application)              | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input checked="" type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment / Reply  | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final  | <input type="checkbox"/> Petition   | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                                      | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                                      | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
| <input type="checkbox"/> Express Abandonment Request                                    | <input type="checkbox"/> Terminal Disclaimer  | Return Postcard  |
| <input type="checkbox"/> Information Disclosure Statement                               | <input type="checkbox"/> Request for Refund   |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                         | <input type="checkbox"/> CD, Number of CD(s)  |  |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application               | Remarks   |  |
| <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |
|--|---|
| Firm or Individual name                    | Steven H. Slater<br>Slater & Matsil, L.L.P. |
| Signature                                  |   |
| Date                                       | October 4, 2001                             |

| CERTIFICATE OF MAILING  |                 |                 |                 |
|---|-----------------|-----------------|-----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, BOX MISSING PARTS, Washington, D.C. 20231 on this date: |                 |                 |                 |
|   |                 | October 4, 2001 |                 |
| Type or printed name  | Karen Fabritius |                 |                 |
| Signature   |                 | Date            | October 4, 2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)**475.00****Complete if Known**

|                      |            |
|----------------------|------------|
| Application Number   | 09/923,251 |
| Filing Date          | 8/3/2001   |
| First Named Inventor | Ide        |
| Examiner Name        | TBD        |
| Group Art Unit       | TBD        |
| Attorney Docket No.  | TSU001     |

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

|                        |                         |
|------------------------|-------------------------|
| Deposit Account Number | 50-1065                 |
| Deposit Account Name   | Slater & Matsil, L.L.P. |

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- 
- ☒
- Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:
- 
- ☒
- Check
- ☐
- Credit Card
- ☐
- Money Order
- ☐
- Other

**FEE CALCULATION****1. BASIC FILING FEE**

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description        | Fee Paid |
|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|----------|
| 101                   | 740                   | 201                   | 370                   | Utility filing fee     | 370.00   |
| 106                   | 330                   | 206                   | 165                   | Design filing fee      |          |
| 107                   | 510                   | 207                   | 255                   | Plant filing fee       |          |
| 108                   | 740                   | 208                   | 370                   | Reissue filing fee     |          |
| 114                   | 160                   | 214                   | 80                    | Provisional filing fee |          |

SUBTOTAL (1) (\$)**370.00****2. EXTRA CLAIM FEES**

| Total Claims       | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| Independent Claims | -20**=       | X              |          |
| Multiple Dependent | -3**=        | X              |          |

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description   |
|-----------------------|-----------------------|-----------------------|-----------------------|---|
| 103                   | 18                    | 203                   | 9                     | Claims in excess of 20                                    |
| 102                   | 84                    | 202                   | 42                    | Independent claims in excess of 3                         |
| 104                   | 280                   | 204                   | 140                   | Multiple dependent claim, if not paid                     |
| 109                   | 84                    | 209                   | 42                    | **Reissue independent claims over original patent         |
| 110                   | 18                    | 210                   | 9                     | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)**0**

\*\* or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

| Fee Code | Large Entity Fee (\$) | Fee Code | Small Entity Fee (\$) | Fee Description  | Fee Paid |
|----------|-----------------------|----------|-----------------------|--|----------|
| 105      | 130                   | 205      | 65                    | Surcharge - late filing fee or oath  | 65.00    |
| 127      | 50                    | 227      | 25                    | Surcharge - late provisional filing fee or cover sheet                     |          |
| 139      | 130                   | 139      | 130                   | Non-English specification  |          |
| 147      | 2,520                 | 147      | 2,520                 | For filing a request for ex parte reexamination                            |          |
| 112      | 920*                  | 112      | 920*                  | Requesting publication of SIR prior to Examiner action                     |          |
| 113      | 1,840*                | 113      | 1,840*                | Requesting publication of SIR after Examiner action                        |          |
| 115      | 110                   | 215      | 55                    | Extension for reply within first month                                     |          |
| 116      | 400                   | 216      | 200                   | Extension for reply within second month                                    |          |
| 117      | 920                   | 217      | 460                   | Extension for reply within third month                                     |          |
| 118      | 1,440                 | 218      | 720                   | Extension for reply within fourth month                                    |          |
| 128      | 1,960                 | 228      | 980                   | Extension for reply within fifth month                                     |          |
| 119      | 320                   | 219      | 160                   | Notice of Appeal   |          |
| 120      | 320                   | 220      | 160                   | Filing a brief in support of an appeal                                     |          |
| 121      | 280                   | 221      | 140                   | Request for oral hearing   |          |
| 138      | 1,510                 | 138      | 1,510                 | Petition to institute a public use proceeding                              |          |
| 140      | 110                   | 240      | 55                    | Petition to revive - unavoidable   |          |
| 141      | 1,280                 | 241      | 640                   | Petition to revive - unintentional   |          |
| 142      | 1,280                 | 242      | 640                   | Utility issue fee (or reissue)   |          |
| 143      | 460                   | 243      | 230                   | Design issue fee   |          |
| 144      | 620                   | 244      | 310                   | Plant issue fee  |          |
| 122      | 130                   | 122      | 130                   | Petitions to the Commissioner  |          |
| 123      | 50                    | 123      | 50                    | Processing fee under 37 CFR 1.17(q)  |          |
| 126      | 180                   | 126      | 180                   | Submission of Information Disclosure Stmt                                  |          |
| 581      | 40                    | 581      | 40                    | Recording each patent assignment per property (times number of properties) | 40.00    |
| 146      | 740                   | 246      | 370                   | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |
| 149      | 740                   | 249      | 370                   | For each additional invention to be examined (37 CFR § 1.129(b))           |          |
| 179      | 740                   | 279      | 370                   | Request for Continued Examination (RCE)                                    |          |
| 169      | 900                   | 169      | 900                   | Request for expedited examination of a design application                  |          |

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**105.00****SUBMITTED BY**

Complete (if applicable)

|                   |                  |                                   |                 |           |              |
|-------------------|------------------|-----------------------------------|-----------------|-----------|--------------|
| Name (Print/Type) | Steven H. Slater | Registration No. (Attorney/Agent) | 35361           | Telephone | 972-732-1001 |
| Signature         |                  | Date                              | October 4, 2001 |           |              |

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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